



PATENT
Attorney Docket No. INL-091

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Cauwenberghs *et al.* CONFIRMATION NO.: 7478
SERIAL NO.: 10/019,740 GROUP NO.: 1645
FILED: May 8, 2002 EXAMINER: Gabel, G.
TITLE: DETECTION OF VON-WILLEBRAND FACTOR (vWF) ACTIVITY

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 12th day of November, 2004.

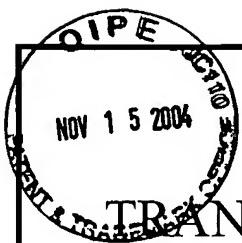

Colleen A. Ridge

Commissioner for Patents
P.O. Box 1450
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Sir:

Submitted herewith are:

1. Transmittal Form (1 pg.);
2. Preliminary Amendment (3 pgs.);
3. Second Supplemental Declaration for Utility or Design Patent Application (3 pgs.); and
4. Return Receipt Postcard.



**TRANSMITTAL
FORM**

| | | |
|-------------------------|---------------------------|----------------|
| TRANSMITTAL FORM | Application Serial Number | 10/019,740 |
| | Filing Date | May 8, 2002 |
| | First Named Inventor | Cauwenberghs |
| | Group Art Unit | 1645 |
| | Examiner Name | Gabel, G. |
| | Attorney Docket No. | INL-091 |
| | Patent No. | Not applicable |
| | Issue Date | Not applicable |

ENCLOSURES (check all that apply)

| | | |
|---|--|--|
| <input type="checkbox"/> Fee Transmittal Form <ul style="list-style-type: none"> <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment/Response <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____] | <input type="checkbox"/> Formal Drawing(s) | <input type="checkbox"/> Appeal Brief (in triplicate) |
| | <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal | <input type="checkbox"/> Status Inquiry |
| | <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) | <input checked="" type="checkbox"/> Return Receipt Postcard |
| | <input type="checkbox"/> Terminal Disclaimer | <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 |
| <input type="checkbox"/> Petition for Extension of Time | <input checked="" type="checkbox"/> Second Supplemental Declaration for Utility or Design Patent Application | <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 |
| <input type="checkbox"/> Information Disclosure Statement <ul style="list-style-type: none"> <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations | <input type="checkbox"/> Small Entity Statement | <input type="checkbox"/> Additional Enclosure(s) (please identify below) |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD(s) for large table or computer program | |
| <input type="checkbox"/> Sequence Listing submission <ul style="list-style-type: none"> <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Amendment After Allowance | |
| | <input type="checkbox"/> Request for Certificate of Correction <ul style="list-style-type: none"> <input type="checkbox"/> Certificate of Correction (in duplicate) | |

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